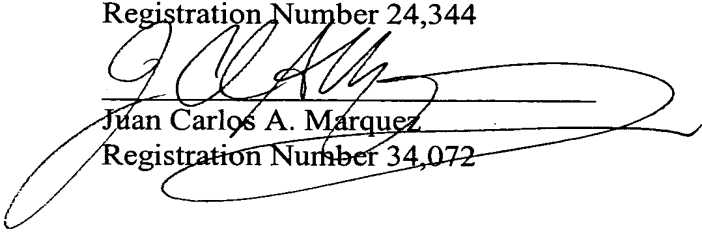




- [ ] Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.
- [ ] A check in the amount of \$\_\_\_\_\_ is enclosed.
- [ x ] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

\_\_\_\_\_  
Stanley P. Fisher  
Registration Number 24,344

  
\_\_\_\_\_  
Juan Carlos A. Marquez  
Registration Number 34,072

**REED SMITH LLP**  
3110 Fairview Park Drive, Suite 1400  
Falls Church, Virginia 22042  
(703) 641-4200

**February 10, 2004**



**Examiner:**  
**DUONG, THOI V.**

This is in response to the Office Action mailed on November 10, 2003 the period of response to which is set to expire on February 10, 2004. Please amend the above-referenced application as follows: